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Fill in this information to identify yo	ur case:
United States Bankruptcy Court for	r the:
Eastern District of Pen	nsylvania
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Colleen	
	Write the name that is on your	First name	First name
	government-issued picture	Marie	
	identification (for example, your driver's license or passport).	Middle name	Middle name
	. , ,	Adams	
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names and any assumed, trade names and doing business as names.	Middle name Last name	Middle name Last name
	De NOT list the many of any	Last name	Last Hame
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your	4 6 7 6	
	Social Security number or	xxx - xx - <u>1</u> <u>8</u> <u>7</u> <u>2</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Deb	tor 1 Colleen	Marie	Adams	Case number (if known)				
	First Name	Middle Name	Last Name	Caco nambor (#				
		About Debtor	1:	About Debtor 2 (Spous	e Only in a Joint Case):			
4.	Your Employer Identification Number (EIN), if any.							
		EIN		EIN				
		EIN		<u> </u>				
5.	Where you live			If Debtor 2 lives at a dif	ferent address:			
		2800 Guyton	Street					
			treet	Number Street				
		Easton, PA 18						
		City Northampton		City	State ZIP Code			
		County		County				
		•		-				
			address is different from the one above ote that the court will send any notices ting address.		dress is different from yours, fill court will send any notices to you			
		Number S	treet	Number Street				
		P.O. Box		P.O. Box				
		City	State ZIP Code	City	State ZIP Code			
6.	Why you are choosing <i>this</i>	Check one:		Check one:				
	district to file for bankruptcy	Over the la have lived district.	ast 180 days before filing this petition, I in this district longer than in any other	Over the last 180 da have lived in this disdistrict.	ays before filing this petition, I strict longer than in any other			
			ther reason. Explain. S.C. § 1408)	☐ I have another reas (See 28 U.S.C. § 14				

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Adams

Deb	tor 1	Colleen	Marie	Adams		Case nun	nber (if known)	
		First Name	Middle Na	me Last Name	_			
Par	t 2: Tell th	ne Court About You	ır Bankı	ruptcy Case				
7. The chapter of the Bankrupto Code you are choosing to file under			y Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Fili.					
8.	How you w	rill pay the fee	deta chec a cre l nec to P l rec judg offic choc	ills about how you may p ck, or money order. If you edit card or check with a ed to pay the fee in insta ay The Filing Fee in Insta quest that my fee be wain e may, but is not required ial poverty line that applie	ay. Typically, if you are paur attorney is submitting you pre-printed address. Illiments. If you choose this allments (Official Form 10% oved (You may request this downward to, waive your fee, and rest to your family size and fill out the Application to I	ying the fee yoursel our payment on you s option, sign and a BA). option only if you a nay do so only if yo you are unable to p	k's office in your local court for more f, you may pay with cash, cashier's r behalf, your attorney may pay with ttach the <i>Application for Individuals</i> re filing for Chapter 7. By law, a ur income is less than 150% of the ay the fee in installments). If you <i>Filing Fee Waived</i> (Official Form	
9.		iled for bankruptcy ast 8 years?	☑ No. □ Yes.	District District District	Where	MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number	
10.	pending or spouse who case with y	nkruptcy cases being filed by a o is not filing this ou, or by a artner, or by an	☑ No. □ Yes.	District	When	M / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known	
11.	Do you ren	nt your residence?	✓ No. ☐ Yes.	No. Go to line 12.	ined an eviction judgment Statement About an Evicti		st You (Form 101A) and file it	

Debtor 1

Colleen

Marie

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Deb	tor 1 Colleen	Marie	1	Adams		Case number (if known)				
	First Name	Middle	Name	Last Name		, , , , , , , , , , , , , , , , , , , ,				
Par	t 3: Report About Any Busin	esses	s You Ow	n as a Sole Propri	etor					
12.	Are you a sole proprietor of	1	lo. Go to P	art 4.						
	any full- or part-time business?	☐ Y	es. Name	and location of busines	ss					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a	N	Name of business, if any							
	corporation, partnership, or LLC.	N	lumber	Street						
	If you have more than one sole proprietorship, use a separate sheet and attach it to this notified.	_								
	petition.	C	City		State	ZIP Code				
		C	Check the appropriate box to describe your business:							
		☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))								
		☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))								
		☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))								
			Commo	odity Broker (as defined	in 11 U.S.C. § 101(6))					
			☐ None of the above							
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)?	proce debto of ope	eed under S or or you ar erations, ca	Subchapter V so that it re choosing to proceed	can set appropriate deadi under Subchapter V, you	you are a small business debto. lines. If you indicate that you ar must attach your most recent b n or if any of these documents	e a small business palance sheet, statement			
	For a definition of small business	4 1	lo. I ar	m not filing under Chap	ter 11.					
	debtor, see 11 U.S.C. § 101(51D).			m filing under Chapter nkruptcy Code.	11, but I am NOT a small I	ousiness debtor according to th	e definition in the			
		□ Y				debtor according to the definition				
		☐ Y			11, I am a debtor accordin ceed under Subchapter V	g to the definition in § 1182(1) of Chapter 11.	of the Bankruptcy			

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Debt	or 1	Colleen	Marie	Adams		Case numb	oer (if known) _		
		First Name	Middle Name	e Last Name					
Par	4: Report	if You Own or Ha	ave Any Ha	azardous Property or	Any Prope	erty That Needs Immediat	te Attentior	า	
14.	Do you owr	Do you own or have any							
		operty that poses or is leged to pose a threat of uninent and identifiable	☐ Yes.	What is the hazard?					
	imminent a								
	hazard to public health or safety? Or do you own any								
	property that needs immediate attention?			If immediate attention is i	needed, why	is it needed?			
	For example, do you own								
	that must be	perishable goods, or livestock hat must be fed, or a building hat needs urgent repairs?							
	triat riceus u	rgent repairs:							
				Where is the property?					
					Number	Street			
					City		State	ZIP Code	

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Debtor 1 Colleen Marie Adams Case number (if known) ______

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

_	I am not required to receive a briefing about credit
	counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l	I am not required to receive a briefing about credit
	counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1		Colleen	Marie	Adams	Case number (if known)				
First Name		Middle N	lame Last Name						
Par	t 6: Answe	r These Question	s for R	eporting Purposes					
16. What kind of debts do you have?		16a.							
			for a business or investment of No. Go to line 16c. Yes. Go to line 17.	or th	ss debts? Business debts are debts rough the operation of the business	or in	vestment.		
			16C.	State the type of debts you ow	≀e tr	nat are not consumer debts or busin	ess c	IEDTS.	
17.	Do you estinexempt propand adminis	g under Chapter 7? nate that after any perty is excluded trative expenses are ids will be available ion to unsecured	 e	3					
18.	How many c	reditors do you t you owe?	3	1-49	00				
19.	How much c	lo you estimate you worth?	r 🗆 👿	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
	liabilities to			\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Par	t 7: Sign Be	elow							
Foi	r you	If I have States C If no atto have ob: I reques I unders bankrup and 357	chosen code. I un code. I un come preparament are trelief in tand malatcy case 1. S/ Collection	to file under Chapter 7, I am aw nderstand the relief available un presents me and I did not pay on nd read the notice required by 1 accordance with the chapter of king a false statement, conceal	ware nder or ag 11 U of title	each chapter, and I choose to proc ree to pay someone who is not an a	er Chaceed of attorn in this perty	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I s petition. by fraud in connection with a	
		Ex	kecuted (on 03/25/2024 MM/ DD/ YYYY					

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Debtor 1 Colleen		Marie Adams		Case number (if known)				
	First Name	Middle Name	Last Name	Case namber (# Niewi)				
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		proceed under each chapter for 11 U.S.C. § 342	Chapter 7, 11, 12, or 13 of or which the person is eliging 2(b) and, in a case in which	this petition, declare that I have informed the debtor(s) about eligibility to ititle 11, United States Code, and have explained the relief available under ole. I also certify that I have delivered to the debtor(s) the notice required by h § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.				
		X /s/ Micha	el A. Cibik	Date 03/25/2024				
		· -	of Attorney for Debtor	MM / DD / YYYY				
		Michael A Printed nar Cibik Law	me					
		Firm name						
		1500 Wali	nut Street Suite 900					
		Number	Street					
		Philadelp	hia	PA 19102				
		City		State ZIP Code				
		Contact ph	one (215) 735-1060	Email address mail@cibiklaw.com				
		23110		PA				
		Bar numbe	er	State				

Ca	se 24-11002	Doc 1 F	Filed 03/25/24 Document	Entered 03/25/2 Page 9 of 43	4 15:51:49	Desc Main
Fill in this inform	ation to identify your	case and this	filing:			
Debtor 1	Colleen	Marie	Adams		_	
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name		_	
United States Bar	nkruptcy Court for the:	East	ern Distric	t of Pennsylvania		
Case number					_	Check if this is an
						amended filing
Official For	m 106A/B					
Schedule	e A/B: Prop	perty				12/15
In each category	, separately list an	d describe ite	ms. List an asset o	nly once. If an asset fits	in more than o	ne category, list the asset in

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Describe Each Residence	e, Building, Land, or Other Real Estate	You Own or Have an	Interest In				
1.	. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?								
	□ N	lo. Go to Part 2.							
	√ Y	es. Where is the property?							
	1.1	2800 Guyton St Street address, if available, or other	What is the property? Check all that apply. ☑ Single-family home □ Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.					
		description	 ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land 	Current value of the entire property?	Current value of the portion you own?				
		Easton, PA 18045-6003	☐ Investment property	\$218,800.00	\$218,800.00				
		City State ZIP Code	☐ Timeshare ☐ Other	Describe the nature of yo (such as fee simple, tena					
		Northampton County	Who has an interest in the property? Check one.	a life estate), if known.					
		County	✓ Debtor 1 only	Fee Simple					
			 Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another 	☐ Check if this is community property (see instructions)					
			Other information you wish to add about this ite property identification number:	•					
			Source of Value: Key Realty Appraisal (\$273,500	less 20% closing costs)					
2.	2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here								
Pa	ırt 2:	Describe Your Vehicles							
Da :		m laga an haya lanal an an italia in	Association and the state of th	I am mat 2 Inchilded a more selection					
			sterest in any vehicles, whether they are registered rehicle, also report it on Schedule G: Executory Contra		s				
3.	Ca	rs, vans, trucks, tractors, sport utility	vehicles, motorcycles						
		No							
	\checkmark	Yes							

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Debtor Adams, Colleen Marie Case number (if known)

	3.1	Make:	Mazda	Who has an interest in the property? Check one.	Do not deduct secured cl	aims or exemptions. Put
		Model:	6	✓ Debtor 1 only - □ Debtor 2 only	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property.
		Year:	2011	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the	Current value of the
		Approximate mileage:	198000	Check if this is community property (see	entire property? \$543.00	portion you own? \$543.00
		Other information:		instructions)		
				J		
	If you	own or have more than	one, describe	e here:		
	3.2	Make:	FIAT	Who has an interest in the property? Check one.	Do not deduct secured cl	
		Model:	500X	✓ Debtor 1 only– Debtor 2 only	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property.
		Year:	2018	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the	Current value of the
		Approximate mileage:	25000		entire property?	portion you own?
		Other information:		 Check if this is community property (see instructions) 	\$8,229.00	\$8,229.00
				٦		
	VA/		AT\/-			
4.			•	and other recreational vehicles, other vehicles, and all watercraft, fishing vessels, snowmobiles, motorcycle a		
	√ N	•	, , , , , , , , , , , , , , , , , , , ,	,		
	□ Y	'es				
5.				own for all of your entries from Part 2, including any		\$8,772.00
	you h	have attached for Part	2. Write that	number here	-	
Pa	rt 3:	Describe You	· Personal	and Household Items		
				erest in any of the following items?		Current value of the
<i>D</i> 0 ,	ou ow	ii oi iiave aliy legal oi	equitable illi	erest in any or the following items:		portion you own?
						Do not deduct secured claims or exemptions.
6.	Hous	sehold goods and furn	ishings			
	Exan	nples: Major appliances	s, furniture, lin	ens, china, kitchenware		
	□ N	lo				
	√ 1 Y	es. Describe	Various used valued at \$60	pieces of furniture, furnishings, appliances, linens, and 0 or less.	other similar items, each	\$950.00
7.	Flect	tronics				
		nples: Televisions and r		video, stereo, and digital equipment; computers, printer	s, scanners; music	
		•	ronic devices	including cell phones, cameras, media players, games		
	□ N	_				
	VI Y	es. Describe	Various used	televisions, mobile devices, and computers, each value	d at \$600 or less.	\$350.00

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Debtor Adams, Colleen Marie

Case number (if known)

8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	✓ No ☐ Yes. Describe	
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	✓ No ☐ Yes. Describe	
10.	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No ☐ Yes. Describe	
11.	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	☐ No ✓ Yes. Describe Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$250.00
12.	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	1
	✓ Yes. Describe Various used pieces of jewelry.	\$75.00
13.	Non-farm animals Examples: Dogs, cats, birds, horses ✓ No ☐ Yes. Describe	
14.	Any other personal and household items you did not already list, including any health aids you did not list ✓ No ☐ Yes. Give specific information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$1,625.00
Pa	rt 4: Describe Your Financial Assets	
Do y	ou own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ No	
	☑ Yes	

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Debtor Adams, Colleen Marie

Case number (if known)

17.	Deposits of money			
			al accounts; certificates of deposit; shares in credit unions, brokerage houses, have multiple accounts with the same institution, list each.	
	☐ No			
	√ Yes		Institution name:	
		17.1. Checking accour	nt: First Commonwealth Federal Credit Union	\$0.00
		17.2. Checking accour	nt: People's First Federal Credit Union	\$58.00
		17.3. Savings account	First Commonwealth Federal Credit Union	\$0.00
		17.4. Savings account	People's First Federal Credit Union	\$1,600.00
18.		or publicly traded stoo s, investment accounts w	cks vith brokerage firms, money market accounts	
19.	_		ncorporated and unincorporated businesses, including an interest in an	
	information about them			
20.	Negotiable instruments	include personal checks	negotiable and non-negotiable instruments s, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them.	
21.	Retirement or pension		Alla Acceptation and the continue of the conti	
	_	IKA, EKISA, Keogii, 40	11(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	No✓ Yes. List each account separately.	Type of account:	Institution name:	
	, , , , , , , , , , , , , , , , , , , ,	401(k) or similar plan:	Principal Financial Group, Inc.	\$82,498.68
22.	Security deposits and	l prepayments		
	Your share of all unused	d deposits you have made	de so that you may continue service or use from a company	
	Examples: Agreement others	s with landlords, prepaid	d rent, public utilities (electric, gas, water), telecommunications companies, or	
	☑ No			
	☐ Yes			
23.		or a periodic payment of	money to you, either for life or for a number of years)	
	√ No			
	☐ Yes			

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Case number (if known)

24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.	
	26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	
	☑ No	
	☐ Yes	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit	
	☑ No	
	☐ Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property	
	Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
	☑ No	
	Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles	
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	☑ No	
	Yes. Give specific information about them	
Mana		Comment value of the
wone	y or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	☑ No	
	Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29.	Family support	
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	
	☑ No	
	☐ Yes. Give specific information	
30.	Other amounts someone owes you	
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
	☑ No	
	☐ Yes. Give specific information	
31.	Interests in insurance policies	
	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	☑ No	
	Yes. Name the insurance company of each policy and list its value	

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Debtor Adams, Colleen Marie

Case number (if known)

32.	If you a	erest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive recause someone has died.	
	√ No		
	☐ Yes.	Give specific information	
33.	Claims	against third parties, whether or not you have filed a lawsuit or made a demand for payment	
	Exampl	es: Accidents, employment disputes, insurance claims, or rights to sue	
	√ No		
	Yes.	Describe each claim	
34.	Other c	ontingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off	
	√ No		
	Yes.	Describe each claim	
35.	Any fin	ancial assets you did not already list	
	√ No		
	☐ Yes.	Give specific information	
36.		e dollar value of all of your entries from Part 4, including any entries for pages you have attached 4. Write that number here	
Pa	rt 5:	Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1	
37.	Do you	own or have any legal or equitable interest in any business-related property?	
	√ No.	Go to Part 6.	
	☐ Yes.	Go to line 38.	
45.		e dollar value of all of your entries from Part 5, including any entries for pages you have attached 5. Write that number here	
Pa	rt 6:	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	√ No.	Go to Part 7.	
	Yes.	Go to line 47.	
52.		e dollar value of all of your entries from Part 6, including any entries for pages you have attached 6. Write that number here	_]
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you	have other property of any kind you did not already list?	
	Exampl	es: Season tickets, country club membership	
	√ No		
	_	Give specific rmation	
54.	Add the	e dollar value of all of your entries from Part 7. Write that number here	-]
Pa	rt 8:	List the Totals of Each Part of this Form	

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Debtor Adams, Colleen Marie Case number (if known)

55.	Part 1: Total real estate, line 2		→	\$218,800.00
56.	Part 2: Total vehicles, line 5	\$8,772.00		
57.	Part 3: Total personal and household items, line 15	\$1,625.00		
58.	Part 4: Total financial assets, line 36	\$84,156.68		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$94,553.68	Copy personal property total	+ \$94,553.68
63.	Total of all property on Schedule A/B. Add line 55 + line 62.			\$313,353.68

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Fill in this information	to identify your case:				
Debtor 1	Colleen	Marie	Adams		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankr	uptcy Court for the:	East	ern District of Pennsylvania		
Case number					Ch
(if known)					aı

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Claim as	Exempt			
1.	Which set of exemptions are you claiming? Ch ☐ You are claiming state and federal nonbankr ☑ You are claiming federal exemptions. 11 U.S For any property you list on Schedule A/B that	uptcy exemptions. 11 U.S s.C. § 522(b)(2)	.C. §	§ 522(b)(3)	
	of description of the property and line on sedule A/B that lists this property	Current value of the portion you own	Am	nount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Ch	eck only one box for each exemption.	
28	of description: O Guyton St Easton, PA 18045-6003 e from hedule A/B: 1.1	\$218,800.00	1	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1)
	of description: 11 Mazda 6	\$543.00	√	\$543.00	11 U.S.C. § 522(d)(2)
	e from nedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
				\$0.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	

Case 24-11002 Doc 1 Filed 03/25/24 Entered 03/25/24 15:51:49 Desc Main Document Page 17 of 43 Debtor 1 Colleen Marie **Adams** Case number (if known) _ First Name Middle Name Last Name Additional Page Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ■ No Yes

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Debtor 1 Colleen Marie Adams Case number (if known) ______

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: 2018 FIAT 500X Line from Schedule A/B: 3.2	\$8,229.00	\$0.00 100% of fair market value, up to any applicable statutory limit \$0.00 100% of fair market value, up	11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(5)
Brief description: Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less. Line from Schedule A/B: 6	\$950.00	to any applicable statutory limit \$950.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Various used televisions, mobile devices, and computers, each valued at \$600 or less. Line from Schedule A/B: 7	\$350.00	\$350.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Various used articles of clothing, shoes, and accessories, each valued at \$600 or less. Line from Schedule A/B: 11	\$250.00	\$250.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Various used pieces of jewelry. Line from Schedule A/B: 12	\$75.00	\$75.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Brief description: First Commonwealth Federal Credit Union Savings account Line from Schedule A/B:17	\$0.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: First Commonwealth Federal Credit Union Checking account Line from Schedule A/B:17	\$0.00	\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)

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Debtor 1	Colleen	Marie	Adams		Case numb	er (if known)
	First Name	Middle Name	Last Name			
Part 2: Add	ditional Page					
	tion of the property a that lists this prope		Current value of the portion you own	Am	nount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Ch	eck only one box for each exemption.	
Brief descripti			#50.00	$ \sqrt{} $	\$58.00	11 U.S.C. § 522(d)(5)
People's Firs	t Federal Credit Unio	n 	\$58.00		100% of fair market value, up	
Line from Schedule A/B	<u> 17</u>				to any applicable statutory limit	
Brief descripti			#4 000 00	√	\$1,600.00	11 U.S.C. § 522(d)(5)
Savings accou	t Federal Credit Union	n 	\$1,600.00		100% of fair market value, up	
Line from Schedule A/B	e: <u>17</u>				to any applicable statutory limit	
Brief descripti				₫	\$82,498.68	11 U.S.C. § 522(d)(12)
Principal Fina	ancial Group, Inc.		\$82,498.68		100% of fair market value, up	
Line from Schedule A/B	g: <u>21</u>			_	to any applicable statutory limit	

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	43C Z4 1100Z	DOC 1	Document Pa	age 20 of 4:	3	.45 Desc Maii	•
Fill in this inform	nation to identify your ca	ase:					
Debtor 1	Colleen	Marie	Adams				
Debior	First Name	Middle Name	Last Name				
	T HOLT TOURS	madio Hamo	Laot Hamo				
Debtor 2 (Spouse, if filing)	E: AN						
(Spouse, il lilling)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the	e:East	ern District of	Pennsylvania	<u> </u>		
Case number (ïf						
known)	" <u></u>						f this is an
						amende	d filing
Official For	m 106D						
Schedu	Ie D: Cred	itors Wh	o Have Cla	ims Sec	cured by I	roperty	12/15
Be as complete	and accurate as poss	ible. If two marrie	d people are filing toge	ther, both are equ	ually responsible fo	or supplying correct inf	ormation. If
•	•		out, number the entries	•	•		
name and case i	number (if known).						
 Do any cred 	ditors have claims sec	ured by your pro	perty?				
☐ No. Che	ck this box and submit	this form to the cou	ırt with your other schedu	les. You have noth	ning else to report or	this form.	
✓ Yes. Fill	in all of the information	below.					
Part 1:	List All Secured Cla	aims					
rait i.	LIST AII SCCUICG CIR						
2. List all sec	cured claims. If a credi	tor has more than	one secured claim, list the	e creditor	Column A	Column B	Column C
			as a particular claim, list		Amount of claim	Value of collateral	Unsecured
		ssible, list the clain	ns in alphabetical order a	ccording to the	Do not deduct the	that supports this	portion
creditor's na	ame.				value of collateral.	claim	If any
2.1 First Com	monwealth Fcu	Describ	e the property that secu	res the claim:	\$11,498.78	\$8,229.00	\$3,269.78
Creditor's I					_	. ,	. ,
Attn: Banl	kruptcy	2018 FI	AT 500X				
PO Box 2	0450	As of th	e date you file, the clair	n is: Check all tha	t apply		
Number	Street	As or the	•	ii is. Oneck all tha	с арріу.		
	alley, PA 18002-0450	Unlic	· ·				
City	•	Code Disp	•				
- 7	s the debt? Check one	_ 2.0p	of lien. Check all that app	dv			
_,			greement you made (suc	•	accured car loon)		
☑ Debto	•		- ,		secured car loan)		
☐ Debtor	r 2 only r 1 and Debtor 2 only		utory lien (such as tax lien Iment lien from a lawsuit	, mechanic's ilen)			
	r I and Debtor 2 only st one of the debtors an		•				
anothe		a Uthe	er (including a right to et)				
	t if this claim relates to	оа					

\$11,498.78

Date debt was incurred 10/1/2020 Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

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Debtor 1 Colleen Marie Document Page 21 of 43

Case number (if known)

Last Name

			Column A	Column B	Column C
	Additional Page		Amount of claim	Value of collateral	Unsecured
Pa	9	is page, number them beginning with 2.3,	Do not deduct the	that supports this	portion
	followed by 2.4, and so forth.		value of collateral.	claim	If any
2.2	NewRez	Describe the property that secures the claim:	\$180,411.07	\$218,800.00	\$0.00
	Creditor's Name	2800 Guyton St Easton, PA 18045-6003			
	PHH Mortgage Services	2000 Guyton Gt Zucton, 177 100 10 0000			
	Po Box 24738	As of the date you file, the claim is: Check all tha	t apply.		
	Number Street	☐ Contingent			
	West Palm Bch, FL 33416-4738	☐ Unliquidated			
	City State ZIP Code	☐ Disputed			
	Who owes the debt? Check one.	Nature of lien. Check all that apply.			
	✓ Debtor 1 only	✓ An agreement you made (such as mortgage or)	secured car loan)		
	☐ Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	Debtor 1 and Debtor 2 only	Judgment lien from a lawsuit			
	At least one of the debtors and another	Other (including a right to offset)			
	☐ Check if this claim relates to a community debt				
	Date debt was incurred	Last 4 digits of account number			
2.3	Date debt was incurred	Last 4 digits of account number Describe the property that secures the claim:	\$39,375.00	\$218,800.00	\$0.00
2.3	Date debt was incurred	Describe the property that secures the claim:	\$39,375.00	\$218,800.00	\$0.00
2.3	Date debt was incurred Unison Agreement Corp.		\$39,375.00	\$218,800.00	\$0.00
2.3	Unison Agreement Corp. Creditor's Name	Describe the property that secures the claim:		\$218,800.00	\$0.00
2.3	Unison Agreement Corp. Creditor's Name Po Box 26800	Describe the property that secures the claim: 2800 Guyton St Easton, PA 18045-6003		\$218,800.00	\$0.00
2.3	Unison Agreement Corp. Creditor's Name Po Box 26800	Describe the property that secures the claim: 2800 Guyton St Easton, PA 18045-6003 As of the date you file, the claim is: Check all that		\$218,800.00	\$0.00
2.3	Unison Agreement Corp. Creditor's Name Po Box 26800 Number Street	Describe the property that secures the claim: 2800 Guyton St Easton, PA 18045-6003 As of the date you file, the claim is: Check all that Contingent		\$218,800.00	\$0.00
2.3	Unison Agreement Corp. Creditor's Name Po Box 26800 Number Street San Francisco, CA 94126-6800	Describe the property that secures the claim: 2800 Guyton St Easton, PA 18045-6003 As of the date you file, the claim is: Check all that Contingent Unliquidated		\$218,800.00	\$0.00
2.3	Unison Agreement Corp. Creditor's Name Po Box 26800 Number Street San Francisco, CA 94126-6800 City State ZIP Code	Describe the property that secures the claim: 2800 Guyton St Easton, PA 18045-6003 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed	t apply.	\$218,800.00	\$0.00
2.3	Unison Agreement Corp. Creditor's Name Po Box 26800 Number Street San Francisco, CA 94126-6800 City State ZIP Code Who owes the debt? Check one.	Describe the property that secures the claim: 2800 Guyton St Easton, PA 18045-6003 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply.	t apply.	\$218,800.00	\$0.00
2.3	Date debt was incurred Unison Agreement Corp. Creditor's Name Po Box 26800 Number Street San Francisco, CA 94126-6800 City State ZIP Code Who owes the debt? Check one. ✓ Debtor 1 only	Describe the property that secures the claim: 2800 Guyton St Easton, PA 18045-6003 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or	t apply.	\$218,800.00	\$0.00
2.3	Unison Agreement Corp. Creditor's Name Po Box 26800 Number Street San Francisco, CA 94126-6800 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: 2800 Guyton St Easton, PA 18045-6003 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or Statutory lien (such as tax lien, mechanic's lien)	t apply.	\$218,800.00	\$0.00
2.3	Unison Agreement Corp. Creditor's Name Po Box 26800 Number Street San Francisco, CA 94126-6800 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	Describe the property that secures the claim: 2800 Guyton St Easton, PA 18045-6003 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to	t apply.	\$218,800.00	\$0.00
2.3	Unison Agreement Corp. Creditor's Name Po Box 26800 Number Street San Francisco, CA 94126-6800 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Describe the property that secures the claim: 2800 Guyton St Easton, PA 18045-6003 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to	t apply.	\$218,800.00	\$0.00
2.3	Unison Agreement Corp. Creditor's Name Po Box 26800 Number Street San Francisco, CA 94126-6800 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	Describe the property that secures the claim: 2800 Guyton St Easton, PA 18045-6003 As of the date you file, the claim is: Check all that Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	t apply.	\$218,800.00	\$0.00

Write that number here:

First Name

Middle Name

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				Do	cument	Page 22 of 43	_		-
Fill in th	is informa	ation to identify	your case:						
Debtor	1	Colleen	Marie		Adams				
	•	First Name	Middle Nar	me	Last Name				
Debtor	2								
(Spouse	e, if filing)	First Name	Middle Nar	me	Last Name				
United	States B	ankruntov Cou	rt for the:	Eastern	Dist	rict of Pennsylvania			
		antiaptoy Cou	10 tio.						
(if know	number m)					_		☐ Check if	this is an
							1	amende	d filing
Officia	al Forr	n 106E/F							
			On a al! + a m	- \ \ / l= .		Llanca a coma al Cla	- !		
Scn	eau	e E/F:	Creditors	s wno	o Have	Unsecured Cla	aims		12/15
orm 100 laims th umber t	6A/B) an nat are li	d on <i>Schedule</i> sted in <i>Schedu</i> es in the boxe	e G: Executory Cor ule D: Creditors W	ntracts and ho Have Ci	l Unexpired Le laims Secured	ult in a claim. Also list executor ases (Official Form 106G). Do r by Property. If more space is n to this page. On the top of any	ot include any creeded, copy the F	editors with pa Part you need, f	rtially secured ill it out,
			DDIODITY ()						
Part		IST AII OF YOU	ur PRIORITY Uns	securea C	laims				
1. Do	any cre	ditors have pri	iority unsecured c	laims agair	nst you?				
	No. Go Yes.	to Part 2.							
cla am	im listed, ounts. As	identify what ty s much as poss	pe of claim it is. If a sible, list the claims i	a claim has in alphabeti	both priority and cal order accord	one priority unsecured claim, list the discount of the claim, list that claim to the creditor's name. If you particular claim, list the other creditory.	im here and show have more than tw	both priority and	nonpriority
(Fo	r an exp	lanation of each	n type of claim, see	the instruct	ions for this for	m in the instruction booklet.)			
							Total claim	Priority amount	Nonpriority amount
2.1 C	ibik Law,	P.C.		Last 4 digi	its of account i	number	\$3,100.00	\$3,100.00	\$0.00
_		ditor's Name		_					· · · · · · · · · · · · · · · · · · ·
1	500 Walr	nut Street Suite	900	When was	the debt incur	red?			
Νι	umber	Street	_						
_				As of the c	date you file, th	ne claim is: Check all that apply.			
<u>P</u>	hiladelph	ia, PA 19102-3	518	☐ Conting	gent				
Ci	ty	State	ZIP Code	Unliquid	dated				
w	ho incur	red the debt?	Check one.	☐ Dispute	ed				
	Debtor			Type of PR	RIORITY unsec	ured claim:			
	Debtor	,			tic support oblig				
		1 and Debtor 2				er debts you owe the government			
	At leas	t one of the deb				rsonal injury while you were intox	cated		
		if this claim is unity debt			Specify Attorne		_		
la.	the eleir	n cubiost to of	Waat?						

✓ No ☐ Yes Case 24-11002 Doc 1 Filed 03/25/24 Entered 03/25/24 15:51:49 Desc Main Document Page 23 of 43

Debtor 1 Colleen Marie Document Adams Page 23 of 43
First Name Middle Name Last Name

Case number (if known)

Pa	art 2: List All of Your NONPRIORITY Unsecured	d Claims									
3.	Do any creditors have nonpriority unsecured claims aga	ninst you?									
	☐ No. You have nothing to report in this part. Submit this fo✓ Yes	orm to the court with your other schedules.									
	nonpriority unsecured claim, list the creditor separately for ea	abetical order of the creditor who holds each claim. If a creditor has more than one ach claim. For each claim listed, identify what type of claim it is. Do not list claims already ar claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured									
		Total claim									
4.1	Credit One Bank	Last 4 digits of account number 6 0 2 3 \$2,098.00									
	Nonpriority Creditor's Name	When was the debt incurred? 12/1/2017									
	Attn: Bankruptcy	when was the dept incurred? 12/1/2017									
	6801 S Cimarron Rd	As of the date you file the claim is Check all that apply									
	Number Street	As of the date you file, the claim is: Check all that apply. ☐ Contingent									
	Las Vegas, NV 89113-2273	Unliquidated									
	City State ZIP Code	☐ Disputed									
	Who incurred the debt? Check one.										
	Debtor 1 only	Type of NONPRIORITY unsecured claim: ☐ Student loans									
	Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as									
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	priority claims									
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard									
	Is the claim subject to offset?										
	☑ No □ Yes										
4.0											
4.2	EVIIV I dildilig/Tesdigent Capital	Last 4 digits of account number 2 9 5 5 \$1,250.00									
	Nonpriority Creditor's Name	When was the debt incurred? 7/1/2021									
	Attn: Bankruptcy	·									
	PO Box 10497 Number Street	As of the date you file, the claim is: Check all that apply.									
	Greenville, SC 29603	☐ Contingent									
	City State ZIP Code	Unliquidated									
	Who incurred the debt? Check one.	☐ Disputed									
	Debtor 1 only	Type of NONPRIORITY unsecured claim:									
	Debtor 2 only	☐ Student loans									
	Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as									
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing plans, and other similar debts									
	☐ Check if this claim is for a community debt	✓ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify FactoringCompanyAccount									
	Is the claim subject to offset?										
	☑ No										
	☐ Yes										

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Debtor 1

 Colleen
 Marie
 Adams
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 2: Your NONPRIORITY Unsecured Claims —	Continuation Page
After listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
A.3 Midland Credit Mgmt Nonpriority Creditor's Name Attn: Bankruptcy PO Box 939069 Number Street San Diego, CA 92193 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes	Last 4 digits of account number 3 3 1 6 \$4,696.00 When was the debt incurred? 10/1/2022 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify FactoringCompanyAccount
4.4 Midland Credit Mgmt Nonpriority Creditor's Name Attn: Bankruptcy PO Box 939069 Number Street San Diego, CA 92193 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 8 1 3 9 \$1,633.00 When was the debt incurred? 8/1/2022 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify FactoringCompanyAccount

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_ Case number (if known) _

Debtor 1 Colleen

ColleenMarieAdamsFirst NameMiddle NameLast Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page		
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so fo	orth.	Total claim
4.5	Onemain	Last 4 digits of account number	9 7 6 1	\$5,763.00
	Nonpriority Creditor's Name	When was the debt incurred?	10/1/2023	
	Po Box 91910	when was the dept incurred?	10/1/2023	
	Number Street			
		As of the date you file, the claim is	s: Check all that apply.	
	Sioux Falls, SD 57109	☐ Contingent☐ Unliquidated		
	City State ZIP Code	☐ Disputed		
	Who incurred the debt? Check one.	□ Disputed		
	☑ Debtor 1 only	Type of NONPRIORITY unsecured	claim:	
	☐ Debtor 2 only	Student loans		
	☐ Debtor 1 and Debtor 2 only		ration agreement or divorce that you di	d not report as
	At least one of the debtors and another	priority claims Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Check if this claim is for a community debt	☑ Other Specify Homelmprovement		
	Is the claim subject to offset?	· · · · · · · · · · · · · · · · · · ·		
	☑ No			
	Yes			
4.6	Onders Only One tell 115		0 0 1 1	Ф7 400 00
1.0	Spring Oaks Capital, Llc Nonpriority Creditor's Name	Last 4 digits of account number	0 8 4 4	\$7,436.00
	• •	When was the debt incurred?	9/29/2023	
	Attn: Bankruptcy			
	P.O. Box 1216	As of the date you file, the claim is	s: Check all that apply.	
	Number Street	☐ Contingent		
	Chesapeake, VA 23327-1216 City State ZIP Code	☐ Unliquidated		
	,	☐ Disputed		
	Who incurred the debt? Check one.	Type of NONDRIODITY upgestred	alaim.	
	Debtor 1 only	Type of NONPRIORITY unsecured Student loans	ciaiii:	
	Debtor 2 only	=	ration agreement or divorce that you di	d not report as
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	priority claims	ration agreement of divorce that you div	a not report as
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing		
	oneck if this claim is for a community dest	☑ Other. Specify UnknownLoanTy	/pe	
	Is the claim subject to offset?			
	☑ No			
	Yes			
4.7	Synchrony Bank/Care Credit	Last 4 digits of account number	8 3 6 8	\$2,542.00
	Nonpriority Creditor's Name	•		
	Attn: Bankruptcy	When was the debt incurred?	3/1/2020	
	PO Box 965060			
	Number Street	As of the date you file, the claim is	s: Check all that apply.	
	Orlando, FL 32896	Contingent		
	City State ZIP Code	Unliquidated		
	Who incurred the debt? Check one.	☐ Disputed		
	✓ Debtor 1 only	Type of NONPRIORITY unsecured	claim:	
	Debtor 2 only	☐ Student loans		
	Debtor 1 and Debtor 2 only		ration agreement or divorce that you di	d not report as
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing	a plane, and other similar debte	
	☐ Check if this claim is for a community debt	✓ Other. Specify ChargeAccount	y piano, and other offilial debts	
	Is the claim subject to offset?	Charge Account	 -	
	Is the claim subject to offset? ✓ No			
	¥ No □ Yes			
	— 163			

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	First Name	Middle Name	Last Name	
Part 2:	Your NONPRIO	RITY Unsecured C	Claims — Continuation Page	
After listing	any entries on this	page, number them b	beginning with 4.4, followed by 4.5, and so forth.	claim
Nonprio	Fargo Bank NA prity Creditor's Name ankruptcy		Last 4 digits of account number 9 7 4 5 \$4,5 When was the debt incurred? 9/1/2018	238.00
Numbe	e Campus MAC X23 r Street oines, IA 50328 Sta		As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unliquidated	
☑ Det ☐ Det ☐ At I	occurred the debt? Co otor 1 only otor 2 only otor 1 and Debtor 2 of east one of the debt eck if this claim is f	only	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not repor priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard	rt as
Is the o		set?	Cities: Specify Orealicato	

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_ Case number (if known) _

Debtor 1

 Colleen
 Marie
 Adams

 First Name
 Middle Name
 Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.

		ts of certain types of unsecured claims. This information is s for each type of unsecured claim.	for st	atist	ical reporting purposes on
					Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.		\$0.00
Hom Part 1	6b.	Taxes and certain other debts you owe the government	6b.		\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$3,100.00
	6e.	Total. Add lines 6a through 6d.	6e.	•	\$3,100.00
					Total claim
Total claims from Part 2	6f.	Student loans	6f.		\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$29,656.00
	6j.	Total. Add lines 6f through 6i.	6j.	١	\$29,656.00

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Fill in this information	to identify your case	:		
Debtor 1	Colleen	Marie	Adams	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:	Eas	tern District of Pennsylva	nia
Case number (if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with wh	om you ha	ve the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	

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			D	ocument Pa	ae 29 of 43	_	
Fill in	this inform	ation to identify your ca	se:				
Deb	tor 1	Colleen	Marie	Adams			
		First Name	Middle Name	Last Name			
	tor 2				_		
(Spo	use, if filing)	First Name	Middle Name	Last Name			
Unite	ed States E	Bankruptcy Court for the	: Eastern	District of	Pennsylvania		
	e number					☐ Check if this is an	
(if kn	own)					amended filing	1
Offic	cial For	m 106H					
Scl	hedu	le H: Your	Codebtor	'S		1	12/15
iling t	ogether, b	oth are equally respor	sible for supplying	correct information. I	f more space is needed, o	curate as possible. If two married people copy the Additional Page, fill it out, and n Pages, write your name and case numbe	umbe
1.	-	ave any codebtors? (If	you are filing a joint	case, do not list either s	spouse as a codebtor.)		
	☑ No ☐ Yes						
2.	California	, Idaho, Louisiana, Neva				perty states and territories include Arizona,	
		o to line 3. Did your spouse, former	enouse or least equi	valent live with you at th	ne time?		
	☐ No		spouse, or legal equi	valent live with you at the	ie unie:		
	_		state or territory did y	ou live?	Fill in the	e name and current address of that person.	
					_		
	N	ame of your spouse, for	mer spouse, or legal	equivalent			
	N	umber St	reet		_		
	-	te	04-4-	710.0-1-	_		
	C	ity	State	ZIP Code	•		
3.	2 again a	s a codebtor only if the	at person is a guara	ntor or cosigner. Mak	e sure you have listed the	s filing with you. List the person shown in e creditor on <i>Schedule D</i> (Official Form 10 <i>ale E/F</i> , or <i>Schedule G</i> to fill out Column 2	06D),
	Column 1	: Your codebtor			Column 2:	The creditor to whom you owe the debt	
					Check all so	chedules that apply:	
3.1							
	Name				☐ Schedu	le D, line	
	Niverteen	04:00			Schedu	le E/F, line	
	Number	Stre	eet		☐ Schedu	le G, line	
	City		State		ZIP Code		
3.2					Oak - die	lo D. lino	
	Name					le D, line	
	Number	Stre	eet			le E/F, line	
					□ Schedu	le G, line	

ZIP Code

State

City

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			D00	cument P	aye	30 01 4	<u>43</u>				
Fil	I in this information to identif	fy your case:									
ח	ebtor 1 Colle	on	Marie	Adams							
	First Na			ast Name							
D	ebtor 2										
(5	Spouse, if filing) First Na	ame	Middle Name L	ast Name				Check if	this is:		
U	nited States Bankruptcy Co	urt for the:	Eastern	District of Penns	ylvan	ia		_	mended filing	•	
	ase number				-		-		oplement sho		tpetition e following date
_	known)							Спар	iei is income	; as or the	e lollowing date
								MM /	DD / YYYY	_	
∩f	ficial Form 106I										
		_									
So	chedule I: You	ur Inco	ome								12/15
add Pa	use is not filing with you, ditional pages, write your nater 1: Describe Employ Fill in your employment	ame and cas		Answer every qu	iestio						
	information.			Debtor 1				De	btor 2 or nor	ı-filing sp	ouse
	If you have more than one attach a separate page with		nployment status	☑ Employed	ı 🗆 N	ot Employ	ed	Emp	oloyed \square_{No}	t Employe	ed
	information about addition employers.	•	cupation	Help Desk C							
	Include part time, seasona	al, or Er	nployer's name	<u>Buzzi Unicer</u>	n US/	I, Inc.					
	self-employed work.	Er	nployer's address	100 Brodhea	d Rd		Ped Employed Not Employed Number Street				
	Occupation may include si or homemaker, if it applies			Number Stree	et			Numbe	r Street		_
				Dathlaham [24.40	047.0005					
				Bethlehem, F City	A 180	State	Zip Code	City		State	Zip Code
		Н	w long employed the	re?						_	
Pa	art 2: Give Details Abo	out Monthl	y Income								
	Estimate monthly income unless you are separated.		ate you file this form.	If you have nothir	ng to r	eport for a	ny line, write	\$0 in the spa	ce. Include y	our non-fi	ling spouse
	If you or your non-filing spongre space, attach a sepa	ouse have m	' '	er, combine the in	forma	tion for all	employers fo	r that person	on the lines l	below. If y	ou need
	,,					Fo	r Debtor 1	For Debte	or 2 or		
							. 505.01	non-filing			
2.	List monthly gross wages deductions.) If not paid mo				2.	:	\$6,036.08		\$0.00		
_		•	·	rage would be.					<u> </u>		
3.	Estimate and list monthly	overtime pa	ау.		3.	+	\$0.00	+	\$0.00		
								1		ı	

\$6,036.08

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1 Colleen Marie Adams Case number (if known) Last Name

			For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$6,036.08	\$0.00	
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$1,221.98	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$356.18	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$177.38	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$177.38	\$0.00	
	5e. Insurance	5e.	\$263.20	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$0.00	\$0.00	
	5h. Other deductions. Specify:	5h.	+\$0.00	+\$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$2,196.12	\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,839.97	\$0.00	
8.	List all other income regularly received:		<u> </u>		
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross				
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00	
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00	
	8f. Other government assistance that you regularly receive				
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income. Specify: Pro-Rata 2023 Federal Income Tax Return	8h.	+ \$521.41	+ \$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$521.41	\$0.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$4,361.38	\$0.00	\$4,361.38
11.	State all other regular contributions to the expenses that you list in Sched	dule J.			
	Include contributions from an unmarried partner, members of your household friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a				
	Specify:			. 11. 4	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics			come. Write that	\$4,361.38
					Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this fo	orm?			
	✓ No. ☐ Yes. Explain:				

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Fill in this informatio	n to identify your case	:	
Debtor 1	Colleen First Name	Marie Middle Name	Adams Last Name
Debtor 2	Filst Name	Middle Name	Last Name
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bank	cruptcy Court for the:	Eas	tern District of Pennsylvania
Case number (if known)			

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Hous	ehold		•	, , ,			
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in No Yes. Debtor 2 mu	a separate household? st file Official Form 106J-2, Expenses for	^r Separate Household of Debtor 2.					
Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not state the dependents' names.	☑ No ☐ Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you? No. Yes. No. Yes. No. Yes. No. Yes. No. Yes. No. Yes.			
Do your expenses include expenses of people other that yourself and your dependent	LI YAS						
Part 2: Estimate Your Ongo	oing Monthly Expenses						
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : Your Income (Official Form 106I.)							
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$1,131.92							
If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$50.00							
			4c.	·			
•	4c. Home maintenance, repair, and upkeep expenses \$50.00 4d. Homeowner's association or condominium dues \$0.00						

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Debtor 1 Colleen Marie Adams Case number (if known) _______
First Name Middle Name Last Name

	You	ur expenses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a. <u> </u>	\$225.00
6b. Water, sewer, garbage collection	6b	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services		\$245.00
6d. Other. Specify:	6d.	\$0.00
. Food and housekeeping supplies	7.	\$1,004.00
. Childcare and children's education costs	8.	\$0.00
. Clothing, laundry, and dry cleaning	9.	\$150.00
Personal care products and services	10.	\$250.00
Medical and dental expenses	11.	\$150.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$350.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$150.00
Charitable contributions and religious donations	14.	\$95.00
	· · · · <u> </u>	φοσιου
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 		
15a. Life insurance	15a. <u> </u>	\$0.00
15b. Health insurance	15b	\$0.00
15c. Vehicle insurance		\$200.00
15d. Other insurance. Specify:	 15d.	\$0.00
 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 	16.	\$0.00
Specify:		Ψ0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	\$0.00
17b. Car payments for Vehicle 2	17b.	\$0.00
	17c	\$0.00
17c. Other. Specify:	17d.	\$0.00
17d. Other. Specify:		
 Your payments of alimony, maintenance, and support that you did not report as dedu from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18	\$0.00
9. Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule	I: Your Income.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

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Deb	tor 1	Colleen	Marie	Marie Adams		(if known)
		First Name	Middle Name	Last Name		,
21.	Other. Spe	ecify:			21.	+\$0.00
22.	Calculate	your monthly expe	enses.			
	22a. Add li	ines 4 through 21.			22a.	\$4,050.92
	22b. Copy	line 22 (monthly e	expenses for Debtor 2),	22b.	\$0.00	
	22c. Add line 22a and 22b. The result is your monthly expenses.				22c.	\$4,050.92
23.	Calculate	your monthly net i	income.			
	23а. Сору	line 12 (your comb	oined monthly income)	from Schedule I.	23a.	\$4,361.38
	23b. Copy	your monthly expe	enses from line 22c abo	ve.	23b.	- \$4,050.92
	23c. Subtra	act your monthly e	xpenses from your mor	nthly income.		
	The r	esult is your month	hly net income.		23c.	\$310.46
						_
24.	Do you ex	pect an increase of	or decrease in your exp	penses within the year after you fi	ile this form?	
				car loan within the year or do you e of a modification to the terms of y		
	✓ No. ☐ Yes.	None				

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Fill in this information to identify your case:						
Debtor 1	Colleen	Marie	Adams			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Eas	tern District of Pennsylvania			
Case number (if known)						

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

	Your assets
	Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$218,800.0
1b. Copy line 62, Total personal property, from Schedule A/B	\$94,553.6
1c. Copy line 63, Total of all property on Schedule A/B	\$313,353.6
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$231,284.8
,	
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$3,100.0
,	\$3,100.0 + \$29,656.0
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$29,656.0
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	+ \$29,656.0
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	+ \$29,656.0
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	+ \$29,656.0
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	+ \$29,656.0
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	+ \$29,656.0 \$264,040.8

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Debtor 1	Colleen	Marie	Adams	Case number (if known)
	First Name	Middle Name	Last Name	,

Par	Part 4: Answer These Questions for Administrative and Statistical Records							
	S. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes							
5	 What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 							
В. F F	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.							
9. C	opy the following special categories of claims from Part 4, line 6 of Schedule E/F:	To	otal claim					
	From Part 4 on Schedule E/F, copy the following:							
	9a. Domestic support obligations (Copy line 6a.)		\$0.00					
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)		\$0.00					
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)		\$0.00					
	9d. Student loans. (Copy line 6f.)		\$0.00					
	9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)		\$0.00					
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+.	\$0.00					
	9g. Total . Add lines 9a through 9f.		\$0.00					

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Fill in this information to identify your case:					
Debtor 1	Colleen	Marie	Adams		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		East	tern District of Pennsylvania		
Case number (if known)					

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an atto	orney to help you fill out bankruptcy forms?
√ 1 No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the su	ummary and schedules filed with this declaration and that they are true and correct.
/s/ Colleen Marie Adams Colleen Marie Adams, Debtor 1	
Collecti Marie Adams, Debior 1	
Date 03/25/2024 MM/ DD/ YYYY	
IVIIVI DD/ 1111	

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Fill in this information to identify your case:					
Debtor 1	Colleen	Marie	Adams		
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		East	tern District of Pennsylvania	<u> </u>	
Case number					
(if known)					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before										
1. What is your current marital status?										
☐ Married										
✓ Not married										
2 During the last 3 years, have you lived an	ovwhere other than where v	ou live now?								
2. During the last 3 years, have you lived anywhere other than where you live now? 1 No										
Yes. List all of the places you lived in the last 3 years. Do not include where you live now.										
_ roo. Elet all of the places you lived in the	io laot o youro. Do not mora	io unioro you iivo noiii.								
3. Within the last 8 years, did you ever live	with a spouse or legal equiv	/alent in a community prop	perty state or territory?(Con	nmunity property states and						
territories include Arizona, California, Idaho,	Louisiana, Nevada, New Me	exico, Puerto Rico, Texas, W	/ashington, and Wisconsin.)							
☑ No										
☐ Yes. Make sure you fill out <i>Schedule H</i>	: Your Codebtors (Official Fo	orm 106H).								
Part 2: Explain the Sources of Your I	Income									
4. Did you have any income from employme. Fill in the total amount of income you receive. If you are filing a joint case and you have inc	ed from all jobs and all busine	esses, including part-time a	ctivities.	ears?						
✓ Yes. Fill in the details.										
	Debtor 1		Debtor 2							
	Sources of income	Gross income	Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions)							
		(before deductions and		(before deductions and						
From January 1 of current year until the date you filed for bankruptcy:		(before deductions and		(before deductions and						

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ebtor 1	Colleen	Marie	Adams		Case number (if known)
	First Name	Middle Name	Last Name		
For last	calendar year:	✓ wa	ages, commissions,		☐ Wages, commissions,
	1 to December 31,	ha	nuses, tips	\$73,718.46	bonuses, tips
		YYYY DOp	erating a business		Operating a business
	calendar year before	ho	ages, commissions, nuses, tips	\$62,147.00	☐ Wages, commissions, bonuses, tips
(ouridary	1 to Boomson 01, _		erating a business		Operating a business
Include inc public bene filing a joint	ome regardless of whefit payments; pension	hether that income is ons; rental income; in		her income are alimon collected from lawsui	ny; child support; Social Security, unemployment, and other its; royalties; and gambling and lottery winnings. If you are
Part 3: Li	st Certain Payme	ents You Made Be	efore You Filed for B	ankruptcy	
6. Are either	er Debtor 1's or Debt	or 2's debts primarily	y consumer debts?		
☐ No.	an individual prima	rily for a personal, far	mily, or household purpos	se."	lefined in 11 U.S.C. § 101(8) as "incurred by
	_	·	oankruptcy, did you pay a	iny creditor a total or s	\$7,575 of more:
	☐ No. Go to line 7.				
	paid that	creditor. Do not inclu		ic support obligations	or more payments and the total amount you s, such as child support and alimony. Also, do
	* Subject to adjustn	nent on 4/01/25 and	every 3 years after that for	or cases filed on or af	fter the date of adjustment.
√ Yes.	Debtor 1 or Debtor	2 or both have prim	arily consumer debts.		
	During the 90 days	before you filed for b	oankruptcy, did you pay a	iny creditor a total of	\$600 or more?
	✓ No. Go to line 7.				
	include p		c support obligations, suc		otal amount you paid that creditor. Do not nd alimony. Also, do not include payments to
Insiders ind you are an	clude your relatives; a officer, director, pers	any general partners; son in control, or own	relatives of any general er of 20% or more of the	partners; partnership ir voting securities; ar	nyone who was an insider? as of which you are a general partner; corporations of which and any managing agent, including one for a business you such as child support and alimony.
☐ Yes. L	ist all payments to a	n insider.			
Include pay		d for bankruptcy, dic ranteed or cosigned		ts or transfer any pro	operty on account of a debt that benefited an insider?
√ No					
☐ Yes. I	ist all payments that	benefited an insider.			

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ebtor 1	Colleen	Marie	Adams	Case number (if known)				
	First Name	Middle Name	Last Name					
Part 4: Id	entify Legal Act	ions, Repossession	ns, and Foreclosures					
	matters, including			ourt action, or administrative proceeding? collection suits, paternity actions, support or custody modifications, and				
√ No								
Yes. F	fill in the details.							
	1 year before you finat apply and fill in the		s any of your property reposs	sessed, foreclosed, garnished, attached, seized, or levied?				
√ No. G	☑ No. Go to line 11.							
☐ Yes. F	Fill in the information	below.						
		filed for bankruptcy, d ause you owed a deb		ank or financial institution, set off any amounts from your accounts or				
√ No								
☐ Yes. F	Fill in the details.							
		led for bankruptcy, wa nn, or another official?	s any of your property in the	possession of an assignee for the benefit of creditors, a court-				
√ No								
Yes								
Part 5: Li	st Certain Gifts	and Contributions						
13. Within	2 years before you	filed for bankruptcy, d	id you give any gifts with a to	tal value of more than \$600 per person?				
√ No								
Yes. F	Fill in the details for e	each gift.						
14. Within	2 years before you	filed for bankruptcy, d	id you give any gifts or contril	butions with a total value of more than \$600 to any charity?				
√ No								
☐ Yes. F	Fill in the details for e	each gift or contribution	1.					
Dort 6: Li	st Certain Losse							
Part 6. Li	St Certain Losse	=5						
15. Within gambling?		led for bankruptcy or	since you filed for bankruptcy	, did you lose anything because of theft, fire, other disaster, or				
√ No								
Yes. F	Fill in the details.							

Doc 1 Filed 03/25/24 Case 24-11002 Entered 03/25/24 15:51:49 Desc Main Page 41 of 43 Document Colleen Debtor 1 Marie Adams Case number (if known) _ First Name Middle Name Last Name List Certain Payments or Transfers Part 7: 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment Cibik Law, P.C. transfer was made Person Who Was Paid Attorney's Fee 3/25/2024 \$2,775.00 1500 Walnut Street Suite 900 Number Street Philadelphia, PA 19102 ZIP Code mail@cibiklaw.com Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ✓ No Yes. Fill in the details. 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) **✓** No ☐ Yes. Fill in the details. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details.

				Document	Page 42 o	f 43
ebtor	1	Colleen	Marie	Adams		Case number (if known)
		First Name	Middle Name	Last Name		
valu	ables?	ow have, or did y	ou have within 1 year I	pefore you filed for ba	nkruptcy, any saf	e deposit box or other depository for securities, cash, or other
\checkmark	No					
	Yes. Fill	in the details.				
	lave you No	stored property	in a storage unit or pla	ce other than your ho	me within 1 year l	before you filed for bankruptcy?
		in the details.				
_	1103.11	in the details.				
Part	9: Ider	ntify Property	You Hold or Contro	I for Someone Else	9	
	_	old or control any	y property that someor	ne else owns? Include	any property you	borrowed from, are storing for, or hold in trust for someone.
\checkmark	No					
	Yes. Fill	in the details.				
Part	10: Giv	ve Details Abo	out Environmental I	nformation		
For t	the purpo	se of Part 10, the	e following definitions	apply:		
:	substanc	es, wastes, or ma				ttion, contamination, releases of hazardous or toxic r medium, including statutes or regulations controlling the
		ns any location, fa t, including dispo		fined under any enviro	nmental law, whe	ther you now own, operate, or utilize it or used to own, operate,
		s material means contaminant, or s		ental law defines as a	hazardous waste,	hazardous substance, toxic substance, hazardous material,
Repo	ort all no	ices, releases, a	nd proceedings that yo	ou know about, regard	lless of when they	occurred.
24. F	las any g	overnmental uni	it notified you that you	may be liable or poter	ntially liable unde	r or in violation of an environmental law?
\checkmark	No					
	Yes. Fill	in the details.				
25. F	lave you	notified any gov	ernmental unit of any r	elease of hazardous r	naterial?	
\checkmark	No					
	Yes. Fill	in the details.				
26. F	łave you	been a party in a	any judicial or administ	rative proceeding und	ler any environmo	ental law? Include settlements and orders.
\checkmark	No					
	Yes. Fill	in the details.				

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Debtor 1	Colleen	Marie	Adams	Case number (if known)				
	First Name	Middle Name	Last Name					
Part 11: G	ive Details Abou	ut Your Business	or Connections to Any Bu	siness				
27. Within 4	vears before vou f	iled for bankruptcy.	did vou own a business or have	e any of the following connections to any business?				
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
A partner in a partnership								
	☐ An officer, director, or managing executive of a corporation							
☐ An	☐ An owner of at least 5% of the voting or equity securities of a corporation							
✓ No. None of the above applies. Go to Part 12.								
Yes. Cl	neck all that apply a	above and fill in the de	etails below for each business.					
	years before you f	iled for bankruptcy, o	did you give a financial stateme	ent to anyone about your business? Include all financial institutions,				
✓ No								
Yes. Fil	I in the details belo	w.						
Part 12: Si	gn Below							
Tart 12. 3	gri below							
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.								
	olleen Marie Adams							
Signa	ture of Colleen Mar	ie Adams, Debtor 1						
Date	03/25/2024	<u> </u>						
Did you atta	ch additional page	es to your Statement	of Financial Affairs for Individu	als Filing for Bankruptcy (Official Form 107)?				
☑ No								
Yes								
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?								
✓ No								
_				Attach the Bankruptcy Petition Preparer's Notice,				
☐ Yes. Na	arrie or person ——			Declaration, and Signature (Official Form 119).				